FORM D OMB APPROVAL UNITED STATES 235-0076 SECURITIES AND EXCHANGE COMMISSION 31, 2002 Washington, D.C. 20549 ırden RECEIVED ... 16.00 FORM D 03000385 JEU USE ONLY NOTICE OF SALE OF SECURITIES Prefix Serial PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** DATE RECEIVED NIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Preferred Stock Financing Filing Under (Check box(es) that apply): Rule 504 ☐ Rule 505 **k** Rule 506 ☐ Section 4(6) 1-5/50 A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Intransa, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (408) 678-8800 2870 Zanker Drive, San Jose, CA 95134 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Computer Networking Type of Business Organization ☐ limited partnership, already formed □ other (please specify): Corporation ☐ limited partnership, to be formed ☐ business trust Month Year Actual or Estimated Date of Incorporation or Organization: 0 ☐ Estimated FINANCIAL K Actual

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

D E

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available estate exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☐ Beneficial Owner ☐ General and/or Check Box(es) that Apply ☑ Director Executive Officer Managing Partner Full Name (Last name first, if individual) Kessler, Alan Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 Check Box(es) that Apply ☐ Promoter ☐ General and/or Executive Officer Director Beneficial Owner Managing Partner Full Name (Last name first, if individual) Wang, Peter Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 Check Box(es) that Apply ☐ General and/or ☐ Promoter ☐ Director M Beneficial Owner K Executive Officer Managing Partner Full Name (Last name first, if individual) Dalgic, Ismail Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 Check Box(es) that Apply ☐ Promoter ☐ Director ☐ General and/or R Beneficial Owner R Executive Officer Managing Partner Full Name (Last name first, if individual) Yow, Raymond Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 ☐ General and/or Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer KI Director Managing Partner Full Name (Last name first, if individual) Benhamou, Eric Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or T Director Managing Partner Full Name (Last name first, if individual) Baehr, Geoffrey Business or Residence Address (Number and Street, City, State, Zip Code) 1393 Geneva Dr., Sunnyvale, CA 94089-1121 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer M Director ☐ General and/or Managing Partner

2

☐ Beneficial Owner ☐ Executive Officer

Director

General and/or
Managing Partner

Check Box(es) that Apply

Raffel, Wes

Full Name (Last name first, if individual)

1393 Geneva Dr., Sunnyvale, CA 94089-1121

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Promoter

				
Full Name (Last name first, if individual) Johnson, Steve				
Business or Residence Address (Number 1393 Geneva Dr., Sunnyvale, CA 94089-1		Code)		
Check Box(es) that Apply ☐ Promoter	TMBeneficial Owner	☐ Executive Officer	又 Director	☐ Director Managing Partner
Full Name (Last name first, if individual) Carr, Robert				
Business or Residence Address (Number 1393 Geneva Drive, Sunnyvale, CA 9408		Code)	<u> </u> 	
Check Box(es) that Apply ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) U.S. Venture Partners			1	
Business or Residence Address (Number 2735 Sand Hill Road, Menlo Park, CA 94	•	Code)	1	
Check Box(es) that Apply ☐ Promote	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Advanced Technology Ventures				
Business or Residence Address (Number 485 Ramona Street, Palo Alto, CA 94301		Code)		
Check Box(es) that Apply ☐ Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Sofinnova Venture Partners				
Business or Residence Address (Number 140 Geary Street, San Francisco, CA 941		Code)		
			i	

. ' '					B. IN	NFORM!	ATION A	BOUT O	FFERIN(G		· 		
	1	.											Yes	No
1. Ha	s the iss	uer sold,	or does t	he issuer i	intend to s	ell, to nor	n-accredit	ed investo	rs in this o	offering?.	' 			Ħ
			Answe	r also in A	appendix,	Column 2	2, if filing	under UL	OE.					
2. W	hat is th	e minimi	ım invest	ment that	will be ac	cepted fro	om any in	dividual?					None	
											 		<u>Yes</u>	<u>No</u>
3. Do	es the of	ffering p	ermit joir	it ownersh	nip of a sir	igle unit?	•••••		•••••		! 		A	
or lis of se	similar sted is an the brolut forth the	remuner associat ker or de ae inform	ation for ted personaler. If mation for	solicitation or agent nore than that broke	n of purch of a broke	nasers in our dealer or dealer sons to	connection er register	n with sale ed with th	es of secu e SEC and	rities in the	e offering a state or	ly, any commission g. If a person to be states, list the name or dealer, you may		
Full Name					IN THIS C	OFFERING	<u>3.</u>							
Business	or Reside	nce Addi	ress (Num	ber and St	reet, City,	State, Zip	Code)						•	
						_					<u> </u>			
Name of A	Associate	ed Broker	or Dealer	•							 			
States in V	Which Pe	erson List	ed Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Check	: "All Sta	tes" or ch	neck indiv	idual State	es)						 :		□ All :	States
[AL] [IL] [MT] [RI]	[AK] [IL] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
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Business	or Reside	ence Add	ress (Nun	ber and St	reet, City,	State, Zip	Code)							
Name of	Associate	ed Broker	or Deale							W 1 4.				
States in '	Which Pe	erson List	ed Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Check	"All Sta	ites" or ch	neck indiv	idual State	es)						ļ	1	□ Ali :	States
[AL] [IL] [MT] [RI]	[AK] [IL] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Nam	e (Last na	ame first,	if individ	ual)								· - · - · · · · · · · · · · · · · · · ·		
Business	or Reside	ence Add	ress (Num	iber and St	treet, City,	State, Zip	Code)				<u> </u>	-		
Name of	Associate	ed Broker	or Deale	<u></u> г		<u></u>					<u> </u>			
States in	Which Pe	erson List	ed Has So	olicited or	Intends to	Solicit Pu	rchasers							
(Check	: "All Sta	ites" or cl	neck indiv	ridual State	es)						ļ 	1		States
[AL] [IL] [MT] [RI]	[AK] [IL] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box TM and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt..... 0 6,067,616.89 6,067,616.89 Equity..... ∏ Preferred ☐ Common Convertible Securities (including warrants) Partnership Interests 0)..... 0 \$ Total \$ 6,067,616.89 \$ 6,067,616.89 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number of Aggregate Investors Dollar Amount of Purchases 17 \$ 6,067,616.89 Accredited Investors 0 \$_ Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees \mathbf{H} 50,000.00

5

0

50,000.00

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

Total

Other Expenses (identify)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	ES AN	D USE	E OF PROCEE	EDS	
٠	b. Enter the difference between the aggregate offering price given in response to Part C - total expenses furnished in response to Part C - Question 4.a. This difference is the proceeds to the issuer."	'adjuste	ed gros	SS		\$6,017,616.89
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed each of the purposes shown. If the amount for any purpose is not known, furnish an estit the box to the left of the estimate. The total of the payments listed must equal the proceeds to the issuer set forth in response to Part C - Question 4.b above.	mate an	d chec	k		
				Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees	. 🗆	\$			\$
	Purchase of real estate	. 🗆	\$			\$
	Purchase, rental or leasing and installation of machinery and equipment	. 🗆	\$			\$
	Construction or leasing of plant buildings and facilities	. 🗆	\$			\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer		\$			\$
	pursuant to a merger)		•			¢
	Working capital		\$. —	Φ
			φ		. 河	\$ 6,017,616.8
	Other (specify):	_ 🗆	\$			\$
		_	\$. 🗆	\$
	Column Totals	. 🗆	\$. M	\$ 6,017,616.89
	Total Payments Listed (column totals added)			M \$6	5,017,6	16.89
_	D. FEDERAL SIGNATURE					
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized per mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exc formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	hange	Comm	ission, upon w		
	uer (Print or Type) Signature (1		Date	
lss	ransa, Inc.	กใ		+	Decen	nber 31, 2002

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

, 1.	Is any party described in 17 CFR 230.262 prese	ently subject to any of the disqualification pr	rovisions of	such rule? Yes No	
	See Ap	pendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as re-	•	state in whi	ich this notice is filed, a noti	ce on
3.	The undersigned issuer hereby undertakes t issuer to offerees.	to furnish to the state administrators, upon	written req	uest, information furnished b	y the
4.	The undersigned issuer represents that the i Limited Offering Exemption (ULOE) of the this exemption has the burden of establishing	state in which this notice is filed and unders			
	suer has read this notification and knows the igned duly authorized person.	contents to be true and has duly caused	this notice	to be signed on its behalf b	y the
Issuer	(Print or Type)	Signature ,)		Date	
Intran	sa, Inc.	(lakersh		December 31, 2002	
Name	(Print or Type)	Title of Signer (Print or Type)		-	

President

E. STATE SIGNATURE

Instruction:

Alan Kessler

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3	-		4			5
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		under St (if ye explat waiver	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accred	lited	ent Yes	No
AL	105	1,0		1111001015	111104111	III vestor.		105	110
AK		-							
AZ									
AR									
CA		Х	Series B Preferred Stock, \$0.555/share	15	\$4,198,062,21	0			Х
CO									
CT								***	
DE									
DC									
FL									
GA							7.11		
HI									
ID									
IL						İ			
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI		X	Series B Preferred Stock, \$0.555/share	1	\$1,384,616.22	0			Х
MN					·				
MS									
MO									

APPENDIX

1	2 3				4			5		
	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)			under S (if ye expla waive		alification State ULOE es, attach unation of er granted) E-Item 1)	
Stata	Yes	No		Number of Accredited Non-Accredited			Amount	Vas	No	
State MT	res	No		Investors	Amount	Investors	Amount	Yes	No	
NE										
NV	_									
NH					· · · · · · · · · · · · · · · · · · ·					
NJ					· · · · · · · · · · · · · · · · · · ·					
NM										
NY			· · · · · · · · · · · · · · · · · · ·			1				
NC										
ND										
ОН										
OK										
OR	1		71. T. P.							
PA										
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VA					, <u></u>					
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WY										
PR					····					